

## **Errata Sheets**

### **Update Information for the following preventive services provider publications**

Please note since the implementation of these publications, the following corrections have been identified:

#### ***The Guide to Medicare preventive Services for Physicians, Providers, Suppliers, and Other Health Care Professionals* (May 2005)**

##### **Page ii**

- 1<sup>st</sup> paragraph, 3<sup>rd</sup> sentence, change “contributed” to “attributed”

##### **Page 4**

- HCPCS codes G0367 and G0368, delete from both code descriptors – “Electrocardiogram, routine ECG with at least 12 leads:”

##### **Page 21**

- Risk Factors, 4<sup>th</sup> bullet, change last word, “intolerance” to “tolerance”

##### **Page 39**

- Call out box titled “Diabetic Supplies and Services Not covered by Medicare”
  - 1<sup>st</sup> paragraph should read: The Medicare Fee-for-Service Program may not cover all supplies and equipment for beneficiaries with diabetes. The following may be excluded:
  - Delete from the bulleted list “prescription drugs” and “routine or yearly physician exams”.
  - Last sentence, insert – Contact your local Medicare contractor for more information on coverage exclusions.

##### **Mammography Screening Chapter**

- Change chapter tab to read “Screening Mammography”

##### **Page 58**

- Add Pap test diagnosis code, V72.31; effective 7/1/05. See CR 3659.

##### **Page 67**

- Add pelvic examination diagnosis code, V72.31; effective 7/1/05. See CR 3659.

***Quick Reference Information: Medicare Preventive Services Chart***  
(May 2005)

**Mammography Screening**

- Correct heading to Screening Mammography
- Clarification – The HCPCS/CPT codes listed on the chart are for Medicare covered mammography services

**Hepatitis B (HBV)**

- Correct code 90717 to 90747

**Screening Pap Tests**

- Add diagnosis code V72.31, effective, 7/1/05. See CR 3659.

**Pelvic Screening Exam**

- Add diagnosis code V72.31, effective, 7/1/05. See CR 3659.